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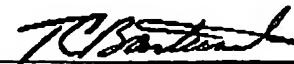
**Facsimile Cover Sheet****OFFICIAL**

<b>To:</b>	<b>Examining Division</b>
<b>Company:</b>	Assistant Commissioner for Patents U.S. Patent and Trademark Office
<b>Fax:</b>	(703) 872-9306
<b>From:</b>	<b>Terry C. Bartunek</b>
<b>Company:</b>	Baxter International Inc. One Baxter Parkway, DF2-2E Deerfield, Illinois 60015
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<b>Date:</b>	May 20, 2004
<b>Pages including this cover page:</b>	13

Re: Copy of Response  
 Veillon et al.  
**LUER TIP CAP HAVING REDUCED REMOVAL FORCE**  
 For Patent Application Serial No. 10/092,738  
Baxter Docket No. CLS-5794

**Certificate of Facsimile Transmission**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Fax No. (703) 872-9306 on May 20, 2004.

By   
 Terry C. Bartunek

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MAR 15 2004

IN RE PATENT APP. OF BAXTER DEERFIELD  
Veillon, et. al. Ser. No. 10/092,738

LUER TIP CAP HAVING REDUCED REMOVAL FORCE

Amendment Transmittal (in duplicate)

Petition and Fee for Extension of Time (37CFR1.136(a)) (in duplicate)

Amendment (including Claims & Remarks/Arguments)

Assistant Commissioner for Patents

Sir:

Please acknowledge receipt of the above identified documents by applying the Patent and Trademark Office receipt hereto and mailing this card.

Respectfully,

BAXTER INTERNATIONAL INC.

3/4/04 JCN



3.30.04  
JCN

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Veillon et. al. )  
Serial No.: 10/092,738 ) Group Art Unit: 3763  
Filed: March 7, 2002 ) Examiner: Rodriguez  
For: LUER TIP CAP HAVING ) I hereby certify that this paper is  
REDUCED REMOVAL ) being deposited with the United States  
FORCE ) Postal Service as first class mail in an  
envelope addressed to:  
The Commissioner for Patents, P.O. Box  
1450, Alexandria, VA 22314, on this date.  
Atty. Docket No.: CLS-5794 ) March 4, 2002 / Jeffrey C. Nichols  
Date Jeffrey C. Nichols

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**AMENDMENT TRANSMITTAL**

Hon. Commissioner for Patents  
Alexandria, VA 22313

Dear Sir.

Transmitted herewith is an amendment in the above-identified application.

(x) No additional fee is required.

### Fee Calculation For Claims As Amended

	As Amended	Previously Paid For	Present Extra	Rate	Additional Fee	
<b>Total Claims</b>	<b>24</b>	<b>-</b>	<b>34</b>	<b>0</b>	<b>x \$ 18 =</b>	<b>\$0</b>
<b>Independent Claims</b>	<b>4</b>	<b>-</b>	<b>8</b>	<b>0</b>	<b>x \$ 86 =</b>	<b>\$0</b>
<b>Fee for Multiple Claims</b>						<b>\$0</b>
				<b>Total Additional Fee</b>		<b>\$0</b>

(x) Other: Petition for One Month Extension of Time

(x) Charge \$ 0 to Deposit Account No. 02-1440. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required to this application under C.F.R. §§ 1.18-1.17 or credit any overpayment to Deposit Account No. 02-1440. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

**BAXTER INTERNATIONAL INC.**

By Jeffrey C Nichols  
Jeffrey C Nichols  
Registration No.: 36,879

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